

File Original and First Copy with
Department of Ecology
Second Copy — Owner's Copy
Third Copy — Driller's Copy

WATER WELL REPORT

STATE OF WASHINGTON

Application No 076072

Permit No

(1) OWNER Name Custom Remodel Address 308 DeBruyn Ave, Langley, Wa. 98

(2) LOCATION OF WELL County Island NE 1/4 NW 1/4 Sec 11 T 29 N R 3E W 1/2

Being and distance from section or subdivision corner 5208 Wilkenson Rd, Langley Wash.

(3) PROPOSED USE. Domestic ☒ Industrial ☐ Municipal ☐
Irrigation ☐ Test Well ☐ Other ☐

(4) TYPE OF WORK Owner's number of well (if more than one)
New well ☒ Method Dug ☐ Bored ☐
Deepened ☐ Cable ☒ Driven ☐
Reconditioned ☐ Rotary ☐ Jetted ☐

(5) DIMENSIONS Diameter of well 6 inches
Drilled 148 ft Depth of completed well 148 ft

(6) CONSTRUCTION DETAILS

Casing installed 6 Diam from +18" ft to 138 ft
Threaded ☐ Diam from ft to ft
Welded ☒ Diam from ft to ft

Perforations Yes ☐ No ☒

Type of perforator used

SIZE of perforations in by in
perforations from ft to ft
perforations from ft to ft
perforations from ft to ft

Screens: Yes ☒ No ☐

Manufacturer's Name Johnson

Type Stainless Steel Model No

Diam 5 Slot size 008 from 138 ft to 148 ft

Diam Slot size from ft to ft

Gravel packed Yes ☐ No ☒ Size of gravel

Gravel placed from ft to ft

Surface seal Yes ☒ No ☐ To what depth? 18 ft

Material used in seal Bentonite

Did any strata contain unusable water? Yes ☐ No ☒

Type of water? Depth of strata

Method of sealing strata off

(7) PUMP Manufacturer's Name Flint & Walling
Type Submersible HP 1

(8) WATER LEVELS Land-surface elevation above mean sea level
Static level 114'-2" ft below top of well Date 10/18/90
Artesian pressure lbs per square inch Date
Artesian water is controlled by (Cap valve etc)

(9) WELL TESTS Drawdown is amount water level is lowered below static level
Was a pump test made? Yes ☒ No ☐ If yes by whom? C.T.W., Dr.
Yield 20 gal/min with 15 ft drawdown after 4 hrs

Recovery data (time taken as zero when pump turned off) (water level measured from well top to water level)

Time	Water Level	Time	Water Level	Time	Water Level
0 Sec	128-11	1 Min	120-3	4 Min	114-9
15 Sec	125-6	2 Min	117-1	5 Min	114-6
30 Sec	123-5	3 Min	115-6	10 Min	Static

Date of test 10/18/90

Ball test 15 gal/min with 10 ft drawdown after 1 hrs

Artesian flow gpm Date

Temperature of water Was a chemical analysis made? Yes ☒ No ☐

(10) WELL LOG

Formation Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated with at least one entry for each change of formation

MATERIAL	FROM	TO
Till: brown	0	15
Sand & gravel: brown, dry	15	117
Sand: brown, water.	117	138
Sand: gray, water, wood chips, very fine sand	138	148
Sandy clay: gray	148	

Screen assembly is 14' long.

RECEIVED
OCT 22 1990
DEPT. OF ECOLOGY

Work started Oct. 1 1990 Completed Oct. 18 1990

WELL DRILLER'S STATEMENT:

This well was drilled under my jurisdiction and this report true to the best of my knowledge and belief

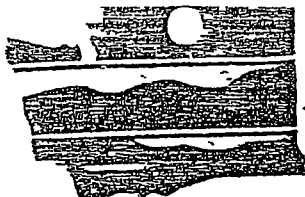
NAME Cable Tool Well Drilling Comp.
(Person firm, or corporation) (Type or print)

Address 11723 194th Ave NE Redmond, 98

[Signed] (Well Driller)

License No 0852

Date Oct. 18 1990



WASHINGTON STATE
DEPARTMENT OF
ECOLOGY

Well Tagging Form

OK

Unique Well Tag No:

AKY 751

RECORD VERIFICATION (check one)



Well Report available (please attach this form to the well report and submit it to the Ecology Regional Office near you)



Verification inconclusive



Well Report not available

WELL OWNERSHIP, IF DIFFERENT FROM WELL REPORT

First Name

Skye

Last Name

Well Water System

Street Address

5240 Fallen Leaf Lane

City

Langley

State

WA 98260

LOCATION OF WELL, IF DIFFERENT FROM WELL REPORT

Well Address

parcel R32911-512-2540 Fallen Leaf Lane

City

Langley

County

Island

T

29

N

R

3

E

WM Sec

11

NE 1/4 of the

NW

FOR AGENCY USE ONLY

Latitude

Longitude

Elevation at land surface _____ feet/meters (circle one)

Additional information, if available:



GPS



Topographic Map



Survey



Computer generated



Digital Altimeter



Topographic Map



Other



Location marked on topographic map (please attach)



Location marked on air photo (please attach)

The Department of Ecology does NOT Warranty the Data and/or the Information on this Well Report.

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WELL CHARACTERISTICS

Description of well (size or casing type of well, housing, etc.)

Lean-to at rear of
pump house

or Well Identification Tag

strapped to well casing

Supplemental tag needed for ease of identifying well?

☐

Yes

☒

No

Where was tag placed?

Scale 1:24,000 (1"=2,000')

Indicate the location of the well within the Section by drawing a dot at that point.

SECTION

11

C	B	A
F	G	H
L	K	J
P	Q	R

Notes

Water Right Permit G1 26400P

FOR ECOLOGY WATER RESOURCES PROGRAM ONLY

Permit #

Date Issued

Application

Permit

Certificate

Claim

Exempt